

193

CLAIMS ONLY						Application Number <u>101549705</u>	Filing Date
						May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
1							
2							
3							
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48							
49							
50							
Total Indep.							
Total Depend							
Total Claims							

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CLAIMS ONLY						Application Number 101549705		Filing Date				
						Applicant(s)						
						May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
10 1												
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1 49												
1 50												
Total Indep							Total Indep					Total Indep
Total Depend							Total Depend					Total Depend
Total Claims							Total Claims					Total Claims

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Final Claim	Date	Final Claim	Date	Final Claim	Date
Original Claim		Original Claim		Original Claim	
151		201		251	
152		202		252	1
153		203		253	1
154		204		254	
155		205		255	
156		206		256	
157		207		257	
158		208		258	
159		209		259	
160		210		260	
161		211		261	
162		212		262	
163		213		263	
164		214		264	
165		215		265	
166		216		266	
167		217		267	
168		218		268	
169		219		269	
170		220		270	
171		221		271	
172		222		272	
173		223		273	
174		224		274	
175		225		275	
176		226		276	
177		227		277	
178		228		278	
179		229		279	
180		230		280	
181		231		281	
182		232		282	
183		233		283	
184		234		284	
185		235		285	
186		236	1	286	
187		237	1	287	
188		238	1	288	
189		239	1	289	
190		240	1	290	
191		241	1	291	
192		242	1	292	
193		243	1	293	
194		244	1	294	
195		245	1	295	
196		246	1	296	
197		247	1	297	
198		248	1	298	
199		249	1	299	
200		250	1	300	

Total
Indep. 14

Total
Depen. 1

Total
Claims 15

Total
Indep. 2

Total
Depen. 1

Total
Claims 3